

## FACT SHEET:

## Kansas Intellectual/Developmental Disability (I/DD) services under KanCare

Kansans with Intellectual/Developmental Disabilities have expressed concern regarding the inclusion of their long-term services and supports (home and community based services) in KanCare. This change is scheduled to take place in January, 2014.

Their primary concerns focus on three areas:

- A desire to keep their targeted case manager
- The ability to keep their current providers
- Concern that their services will be reduced

A great deal of misinformation has been spread about how full inclusion in KanCare will affect consumers, causing them unfounded worry and anxiety. <u>Here is some important information for families and guardians to know:</u>

- People with I/DD can keep their case managers under KanCare. The ability of a
  consumer to keep his or her I/DD targeted case manger through a CDDO, a community
  service provider or independent case management organization is protected by the
  Kansas Developmental Disability Reform Act.
- 2) The ability for Kansans with I/DD to keep their current providers is protected by KanCare health plan contracts.
- 3) The KanCare health plans (managed care organizations, or MCOs) will NOT have the authority to arbitrarily reduce HCBS long-term services and supports because
- 4) CDDOs will continue to complete the BASIS assessments, which determine the level of services for which persons with I/DD are eligible.
- 5) <u>Safeguards are in place to protect Kansans.</u> Any reductions in plans of care have to reviewed and approved by the Kansas Department for Aging and Disability Services before they could be implemented.

Five other HCBS waiver programs providing long term services and supports systems, serving about 12,000 consumers, were successfully included in KanCare in January 2013.

KanCare will strengthen the HCBS programs by including care coordination across the three systems that provide care to persons with I/DD: their physical healthcare, their behavioral healthcare, and their long-term services and supports. The KanCare contracts include an expectation that better coordinated care will demonstrate better overall outcomes than the old system did. These expectations of better outcomes are tied to how the health plans (MCOs) will be compensated. The KanCare contracts allow the State of Kansas to withhold payments to a health plan that does not achieve improvement in care coordination and health outcomes.

- 6) Looking at the big picture, and looking ahead, the inclusion of the I/DD HCBS program into KanCare ultimately will provide financial stability to the system. And it will allow the state to continue to provide these services and supports over the long run. Repeatedly during the past few years, the waiver program has experienced provider reimbursement challenges, benefit-rules changes and an expanding waiting list. These ongoing challenges could be magnified if the I/DD HCBS waiver is isolated -- set apart on its own -- as the only system not included in KanCare, under which reimbursement rates to providers, service levels and case manager consistency is guaranteed by KanCare contracts or state law.
- 7) There are <u>550 Kansans</u> on the I/DD waiver who have signed up to participate in the KanCare I/DD pilot. There are <u>25 providers</u> who have signed up to participate in the KanCare I/DD pilot.
- 8) What is managed care? Managed long-term services and supports (MLTSS) refers to an arrangement between state Medicaid programs and contractors through which the contractors receive capitated payments for LTSS and are accountable for quality, cost, outcomes and other standards set in the contracts.

Many states are increasingly moving toward integrating services for physical health, behavioral health and developmental disability long-term services and supports.